

DEPARTMENT OF HEALTH AND HUMAN SERVICES  
CENTERS FOR MEDICARE & MEDICAID SERVICES

PRINTED: 02/27/2020  
FORM APPROVED  
OMB NO. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>445108</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____  B. WING _____		(X3) DATE SURVEY COMPLETED  <b>C</b> <b>02/20/2020</b>
NAME OF PROVIDER OR SUPPLIER  <b>NHC HEALTHCARE, MURFREESBORO</b>			STREET ADDRESS, CITY, STATE, ZIP CODE <b>420 N UNIVERSITY ST</b> <b>MURFREESBORO, TN 37130</b>		
(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)		(X5) COMPLETION DATE
F 000	INITIAL COMMENTS	F 000			
F 600 SS=D	<p>A recertification survey and complaint investigation #TN00049644 and #TN00050379, were completed on 2/20/2020 at NHC Healthcare Murfreesboro. Deficiencies were cited related to the recertification survey and complaint investigation #TN00049644 and no deficiencies were cited related to complaint investigation #TN00050379 under 42 CFR PART 483, Requirements for Long Term Care Facilities.</p> <p>Free from Abuse and Neglect CFR(s): 483.12(a)(1)</p> <p>§483.12 Freedom from Abuse, Neglect, and Exploitation The resident has the right to be free from abuse, neglect, misappropriation of resident property, and exploitation as defined in this subpart. This includes but is not limited to freedom from corporal punishment, involuntary seclusion and any physical or chemical restraint not required to treat the resident's medical symptoms.</p> <p>§483.12(a) The facility must-</p> <p>§483.12(a)(1) Not use verbal, mental, sexual, or physical abuse, corporal punishment, or involuntary seclusion; This REQUIREMENT is not met as evidenced by: Based on facility policy review, medical record review, and interview, the facility failed to prevent abuse for 2 of 2 residents (Resident #47 and Resident #60) involved in a resident to resident altercation.</p> <p>The findings include:</p>	F 600			

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

Any deficiency statement ending with an asterisk (\*) denotes a deficiency which the institution may be excused from correcting providing it is determined that other safeguards provide sufficient protection to the patients. (See instructions.) Except for nursing homes, the findings stated above are disclosable 90 days following the date of survey whether or not a plan of correction is provided. For nursing homes, the above findings and plans of correction are disclosable 14 days following the date these documents are made available to the facility. If deficiencies are cited, an approved plan of correction is requisite to continued program participation.

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F 600	<p>Continued From page 1</p> <p>Review of the facility policy titled, "Patient Protection and Response Policy for Allegations/Incidents of Abuse, Neglect, Misappropriation of Property and Exploitation," revised 12/11/2017, showed physical abuse included slapping, pinching, and kicking.</p> <p>Review of the medical record, showed Resident #47 was admitted to the facility on 7/11/2013 with diagnoses which included Vascular Dementia with Behavioral Disturbances, Mood Disorder, and Cognitive Communication deficit.</p> <p>Review of the medical record, Quarterly Minimum Data Set (MDS) dated 12/3/2019 showed Resident #47 had a Brief Interview for Mental Status (BIMS) score of 99 indicating severe cognitive impairment.</p> <p>Review of the medical record, showed Resident #60 was admitted to the facility on 7/14/2016 with diagnoses which included Dementia without Behavioral Disturbances, and Adjustment Disorder with Depressed Mood.</p> <p>Review of the Quarterly MDS dated 12/17/2019, showed Resident #60 had a BIMS score of 3 indicating severe cognitive impairment.</p> <p>Review of the facility investigation dated 11/4/2019, showed Resident #47 was found in Resident #60's room rearranging the sheets on Resident #60's bed. Continued review showed the actions of Resident #47 scared Resident #60 and she grabbed Resident #47's hands which caused a skin tear to her right hand. Resident #60 had an X-ray of the right 5th digit because of pain due to physical contact with Resident #47.</p>	F 600			

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F 600	Continued From page 2  During an interview conducted on 2/19/2020 at 8:35 AM, Family Member #2 stated, [named Resident #47] was aggressive and wandered into other resident's rooms and fought with other residents.  During an interview conducted on 2/19/2020 at 3:48 PM, Certified Nurse Aid (CNA) #3 stated she was walking to the dining room around 8:00 PM or 9:00 PM and she heard [named Resident #60] yell "help." When she entered [named Resident #60's] room [named Resident #60] was lying in bed and [Named Resident #47] was standing over [named Resident #60] and her wheel chair was right behind her. [named Resident #47] had [named Resident #60's] blankets in her hands. Resident #60 was grabbing the blankets and also grabbed [named Resident #47's] hands.  During an interview conducted on 2/20/2020 at 4:40 PM, Social Worker #2 stated [named Resident #47] "got easily annoyed."  During an interview conducted on 2/20/2020 at 5:22 PM, the Director Of Nursing confirmed there was a physical altercation between Resident #47 and Resident #60 which resulted in a skin tear for Resident #47 and pain to the right hand resulting in a need for an Xray for Resident #60.	F 600			
F 657 SS=D	Care Plan Timing and Revision CFR(s): 483.21(b)(2)(i)-(iii)  §483.21(b) Comprehensive Care Plans §483.21(b)(2) A comprehensive care plan must be- (i) Developed within 7 days after completion of the comprehensive assessment. (ii) Prepared by an interdisciplinary team, that	F 657			

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F 657	<p>Continued From page 3</p> <p>includes but is not limited to--</p> <p>(A) The attending physician.</p> <p>(B) A registered nurse with responsibility for the resident.</p> <p>(C) A nurse aide with responsibility for the resident.</p> <p>(D) A member of food and nutrition services staff.</p> <p>(E) To the extent practicable, the participation of the resident and the resident's representative(s). An explanation must be included in a resident's medical record if the participation of the resident and their resident representative is determined not practicable for the development of the resident's care plan.</p> <p>(F) Other appropriate staff or professionals in disciplines as determined by the resident's needs or as requested by the resident.</p> <p>(iii) Reviewed and revised by the interdisciplinary team after each assessment, including both the comprehensive and quarterly review assessments.</p> <p>This REQUIREMENT is not met as evidenced by:</p> <p>Based on facility policy review, medical record review, and interview the facility failed to revise a care plan for 1 of 52 residents (Resident #47) reviewed for behaviors.</p> <p>The findings include:</p> <p>Review of the facility policy titled, "Care Plan Development," revised 7/3/2008, showed care plans were updated as needed, and on quarterly basis within 7 days of completion of the Minimum Data Set (MDS) assessment.</p> <p>Review of the medical record, showed Resident #47 was admitted to the facility on 7/11/2013 with diagnoses which included Vascular Dementia with</p>	F 657			

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F 657	<p>Continued From page 4</p> <p>Behavioral Disturbances, Mood Disorder, and Cognitive Communication deficit.</p> <p>Review of the medical record, Quarterly Minimum Data Set (MDS) dated 9/3/2019 showed Resident #47 had a Brief Interview for Mental Status score 99 indicating severe cognitive impairment. Continued review showed Resident #47 had behaviors of wandering, hitting, kicking, pushing, scratching, and grabbing others.</p> <p>Review of the care plan dated 7/1/2019, 11/4/2019, and 11/7/2019 showed no new behavior interventions for Resident #47.</p> <p>Review of the facility investigation dated 11/4/2019 showed Resident #47 was found in Resident #60's room rearranging the sheets on Resident #60's bed. Continued review showed the actions of Resident #47 scared Resident #60 and she grabbed Resident #47's hands which caused a skin tear the right hand. Resident #60 had an X-ray of the right 5th digit because of pain due to physical contact with Resident #47.</p> <p>During an interview conducted on 2/20/2020 at 4:40 PM, Social Worker #2 confirmed the behavioral care plan for Resident #47 was not updated to reflect behaviors prior to the resident to resident incident on 11/3/2019.</p>	F 657			